

City of Bedford Recreation Department Registration Form

This form is used to register all **adult** programs offered by the City of Bedford Recreation Department. Please fill out the form completely and sign. Please make checks payable to the <u>City of Bedford</u>.

<u>Participant</u>					
FullName					
	First	Middle (com	plete)	Last	
Address	<u> </u>	- Ct			
	Street	City		Zip	
Birthdate	Aş	ge	Gender		
Home Phone	Work Phone				
Cell Phone					
E-mail Address					
Emergency Conta	<u>ct Informati</u>	<u>on</u>			
Name	Phone Number				
Please circle one:	City of Be	edford Resident		Bedford County	Resident
agree to indemnify a it's staff, it's success said participant due t the proper clothing a individual to make s	te in said prog and hold harm ors and assign to participation and protective sure the criter hospital for	less the City of B s from any and all in said activity. equipment during ia is met. I gran medical treatment	edford, the claims for It is likewis said prograt my permi	City of Bedford I any and all injurie te assumed that sa am and that it is t assion to transpor	o participant. I hereby Recreation Department, es suffered or caused by id participant will wear he responsibility of the t the participant to the nediate first aid to the
Signature of Adul	t Participant	t		Date	
Receipt Number _					
REC003					